PROOF OF CLAIM AND RELEASE FORM

Deadline for Submission:
If you purchased or otherwise acquired defendant Canopy Growth Corporation ("Canopy") securities during the period between June 27, 2018, and May 28, 2020, both dates inclusive ("Settlement Class Period"), you are a "Settlement Class Member" and you may be entitled to share in the settlement proceeds. (Excluded from the Settlement Class are Defendants and any entity in which the Defendants have a controlling interest, and the officers, directors, affiliates, legal representatives, immediate family members, heirs, successors, subsidiaries and/or assigns of any such individual or entity in their capacity as such.)
If you are a settlement class member, you must complete and submit this Proof of Claim and Release Form ("Proof of Claim") in order to be eligible for any Settlement benefits. You can complete and submit the electronic version of this Proof of Claim by 11:59 p.m. EST on, 2022 at www.strategicclaims.net/CanopyGrowth/.
If you do not complete and submit an electronic version of this Proof of Claim, you must complete and sign this Proof of Claim and mail it by first class mail, postmarked no later than, 2022, to Strategic Claims Services, the Claims Administrator, at the following address:
Canopy Securities Litigation c/o Strategic Claims Services 600 N. Jackson St., Ste. 205 P.O. Box 230 Media, PA 19063 Tel.: 866-274-4004 Fax: 610-565-7985 info@strategicclaims.net
Your failure to submit your claim by, 2022 will subject your claim to rejection and preclude you from receiving any money in connection with the Settlement of this Action. Do not mail or deliver your claim to the Court or to any of the Parties or their counsel, as any such claim will be deemed not to have been submitted. Submit your claim only to the Claims Administrator. If you are a Settlement Class Member and do not submit a proper Proof of Claim, you will not share in the Settlement, but you nevertheless will be bound by the Order and Final Judgment of the Court unless you exclude yourself.
Submission of a Proof of Claim does not assure that you will share in the proceeds of the

Settlement.

CLAIMANT'S STATEMENT

- 1. I (we) purchased or otherwise acquired Canopy Growth Corporation ("Canopy") Common Stock or Call Options, or sold Canopy Put Options, during the Settlement Class Period. (Do not submit this Proof of Claim if you did not purchase or otherwise acquire Canopy Common Stock or Call Options, or sell Canopy Put Options, during the Settlement Class Period.)
- 2. By submitting this Proof of Claim and Release Form, I (we) state that I (we) believe in good faith that I am (we are) a Settlement Class Member(s) as defined above and in the Notice of Proposed Settlement of Class Action (the "Notice"), or am (are) acting for such person(s); that I am (we are) not a Defendant in the Action or anyone excluded from the Settlement Class; that I (we) have read and understand the Notice; that I (we) believe that I am (we are) entitled to receive a share of the Net Settlement Fund, as defined in the Notice; that I (we) elect to participate in the proposed Settlement described in the Notice; and that I (we) have not filed a request for exclusion. (If you are acting in a representative capacity on behalf of a Settlement Class Member [e.g., as an executor, administrator, trustee, or other representative], you must submit evidence of your current authority to act on behalf of that Settlement Class Member. Such evidence would include, for example, letters testamentary, letters of administration, or a copy of the trust documents.)
- 3. I (we) consent to the jurisdiction of the Court with respect to all questions concerning the validity of this Proof of Claim and Release Form. I (we) understand and agree that my (our) claim may be subject to investigation and discovery under the Federal Rules of Civil Procedure, provided that such investigation and discovery shall be limited to my (our) status as a Settlement Class Member(s) and the validity and amount of my (our) claim. No discovery shall be allowed on the merits of the Actions or Settlement in connection with processing of the Proof of Claim.
- 4. I (we) have set forth where requested below all relevant information with respect to each purchase or acquisition of Canopy Securities during the Settlement Class Period, and each sale, if any, of such securities. I (we) agree to furnish additional information to the Claims Administrator to support this claim if requested to do so.
- 5. I (we) have enclosed photocopies of the stockbroker's confirmation slips, stockbroker's statements, or other documents evidencing each purchase/acquisition and sale of Canopy Securities listed below in support of my (our) claim. (IF ANY SUCH DOCUMENTS ARE NOT IN YOUR POSSESSION, PLEASE OBTAIN A COPY OR EQUIVALENT DOCUMENTS FROM YOUR BROKER OR TAX ADVISOR BECAUSE THESE DOCUMENTS ARE NECESSARY TO PROVE AND PROCESS YOUR CLAIM.)
- 6. I (we) understand that the information contained in this Proof of Claim and Release Form is subject to such verification as the Claims Administrator may request or as the Court may direct, and I (we) agree to cooperate in any such verification. (The information requested herein is designed to provide the minimum amount of information necessary to process most simple claims. The Claims Administrator may request additional information as required to efficiently and reliably calculate your Recognized Loss. In some cases, the Claims Administrator may

- condition acceptance of the claim based upon the production of additional information, including, where applicable, information concerning transactions in any derivatives securities such as options.)
- 7. Upon the occurrence of the Court's approval of the Settlement, as detailed in the Notice, I (we) agree and acknowledge that my (our) signature(s) hereto shall effect and constitute a full and final release, relinquishment and discharge by me (us) and my (our) successors and assigns in any capacity (or, if I am (we are) submitting this Proof of Claim on behalf of a corporation, a partnership, estate or one or more other persons, by it, him, her or them, and by its, his, her or their successors and assigns in any capacity) of each of the "Released Persons" of all "Released Claims," as those terms are defined in the Stipulation of Settlement, dated ________, 2021 ("Stipulation"). I (we) further agree and acknowledge that I (we) and anyone claiming through or on my behalf (or, if I am (we are) submitting this Proof of Claim on behalf of a corporation, a partnership, estate or one or more other persons, by it, him, her, or them and anyone claiming through or on its, his, her, or their behalf), will be permanently and forever barred and enjoined from commencing, instituting, prosecuting or continuing to prosecute, in any capacity, any action or other proceeding in any court of law or equity, arbitration tribunal, administrative forum, or any other forum asserting the Released Claims against any of the Released Persons.
- 8. Upon the occurrence of the Court's approval of the Settlement, as detailed in the Notice, I (we) agree and acknowledge that my (our) signature(s) hereto shall effect and constitute a covenant by me (us) and anyone claiming through or on my behalf (or, if I am (we are) submitting this Proof of Claim and Release Form on behalf of a corporation, a partnership, estate or one or more other persons, by it, him, her or them, and anyone claiming through or on its, his, her, or their behalf) to permanently refrain from instituting, commencing or prosecuting in any capacity any Released Claims against any of the Released Persons.
- 9. "Released Persons" has the meaning laid out in the Settlement Stipulation.
- 10. "Released Claims" has the meaning laid out in the Settlement Stipulation.
- 11. "Unknown Claims" has the meaning laid out in the Settlement Stipulation.
- 12. I (we) acknowledge that I (we) may hereafter discover facts in addition to or different from those which I (we) now know or believe to be true with respect to the subject matter of the Released Claims, but expressly fully, finally and forever settle and release, any and all Released Claims, known or unknown, suspected or unsuspected, contingent or non-contingent, whether or not concealed or hidden, which now exist, or heretofore have existed, upon any theory of law or equity now existing or coming into existence in the future, including, but not limited to, conduct which is negligent, intentional, with or without malice, or a breach of fiduciary duty, law or rule, without regard to the subsequent discovery or existence of such different or additional facts.
- 13. I (We) acknowledge that the inclusion of "Unknown Claims" in the definition of claims released pursuant to the Stipulation was separately bargained for and is a material element of the Settlement of which this release is a part.

- 14. NOTICE REGARDING INSTITUTIONAL FILERS: Representatives with authority to file on behalf of (a) accounts of multiple Settlement Class Members and/or (b) institutional accounts with large numbers of transactions ("Representative Filers") must submit information regarding their transactions in an electronic spreadsheet format. If you are a Representative Filer, you must contact the Claims Administrator at efile@strategicclaims.net or visit their website at www.strategicclaims.net to obtain the required file layout. Claims which are not submitted in electronic spreadsheet format and in accordance with the Claims Administrator's instructions may be subject to rejection. All Representative Filers MUST also submit a manually signed Proof of Claim and Release Form, as well as proof of authority to file (see Item 2 of the Claimant's Statement), along with the electronic spreadsheet format. No claims submitted in electronic spreadsheet format will be considered to have been properly submitted unless the Claims Administrator issues to the Claimant a written acknowledgment of receipt and acceptance of electronically submitted data.
- 15. NOTICE REGARDING ONLINE FILING: Claimants who are not Representative Filers may submit their claims online using the electronic version of the Proof of Claim hosted at www.strategicclaims.net. If you are not acting as a Representative Filer, you do not need to contact the Claims Administrator prior to filing; you will receive an automated e-mail confirming receipt once your Proof of Claim and Release Form has been submitted. If you are unsure if you should submit your claim as a Representative Filer, please contact the Claims Administrator at info@strategicclaims.net or (866) 274-4004. If you are not a Representative Filer, but your claim contains a large number of transactions, the Claims Administrator may request that you also submit an electronic spreadsheet showing your transactions to accompany your Proof of Claim.

I. CLAIMANT INFORMATION

Beneficial Owner Name			
Address			
City		State	ZIP
Foreign Province		Foreign Country	
Day Phone		Evening Phone	
Email			
Account Number			
Social Security Number (for individuals):	OR	Taxpayer Identific corporations, etc.):	ation Number (for estates, trusts,
II. SCHEDULE OF TRANSACT Beginning Holdings: A. State the total number of shares of C close of trading on June 26, 2018 (m "zero" or "0."	Canopy	Common Stock held	at the
Purchases/Acquisitions: B. Separately list each and every purch 27, 2018 through August 28, 2020, b (must be documented):		-	•

Trade Date (List Chronologically) (Month/Day/Year)	Number of Shares Purchased/Acquired	Price per Share	Total Cost (Excluding Commissions, Taxes, and Fees)	

Trade Date (List Chronologically) (Month/Day/Year)	Number of Shares Sold	Price per Share	Amount Received (Excluding Commissions, Taxes, and Fees)
	mber of shares of Canopy Comm n August 26, 2020, (<i>must be doo</i>)."		

Strike Price of Call Option	Expiration Date of Call Option (Month/Day/Year)	Option Class Symbol	Number of Call Options in Which You Had an Open Interest
\$	/ /		
\$	/ /		
\$	/ /		
\$	/ /		

Purchases/Acquisitions:

B. Separately list each and every purchase or acquisition (including free receipts) of Canopy Call Options from after the opening of trading on June 27, 2018 through and including the close of trading on May 28, 2020, both dates inclusive, and provide the following information (*must be documented*):

Date of Purchase/ Acquisition (List Chrono- logically) (Month/ Day/ Year)	Strike Price of Call Option	Expiration Date of Call Option (Month/ Day/ Year)	Option Class Symbol	Number of Call Options Purchased/ Acquired	Purchase/ Acquisition Price Per Call Option	Total Purchase/ Acquisition Price (excluding taxes, commissions, and fees)	Insert an "E" if Exercised Insert an "A" if Assigned Insert an "X" if Expired	Exercise Date (Month/ Day/ Year)
/ /	\$	/ /			\$	\$		/ /
/ /	\$	/ /			\$	\$		/ /
/ /	\$	/ /			\$	\$		/ /
/ /	\$	/ /			\$	\$		/ /

Sales:

C. Separately list each and every sale/disposition of Canopy Call Options from after the opening of trading on June 27, 2018 through and including the close of trading on May 28, 2020, both dates inclusive, and provide the following information (*must be documented*):

Date of Sale (List Chronologically) (Month/Day/Year)	Strike Price of Call Option	Expiration Date of Call Option (Month/Day/Year)	Option Class Symbol	Number of Call Options Sold	Sale Price Per Call Option	Total Sale Price (excluding taxes, commissions, and fees)
/ /	\$	/ /			\$	\$
/ /	\$	/ /			\$	\$
/ /	\$	/ /			\$	\$
/ /	\$	/ /			\$	\$

Ending Holdings:

D. Separately list all position in Canopy Call Options in which you had an open interest as of the close of trading on May 28, 2020 (*must be documented*). If none, write "zero" or "0."

		_

Strike Price of Call Option	Expiration Date of Call Option (Month/Day/Year)	Option Class Symbol	Number of Call Options in Which You Had an Open Interest
\$	/ /		
\$	/ /		
\$	/ /		
\$	/ /		

IV. SCHEDULE OF TRANSACTIONS IN CANOPY PUT OPTIONS

Be	ginning Holdings:	
A.	State the total number of Canopy Put Options held at the close of trading	
	on June 26, 2018 (must be documented). If none, write "zero" or "0."	

Strike Price of Put Option	Expiration Date of Put Option (Month/Day/Year)	Option Class Symbol	Number of Put Options in Which You Had an Open Interest
\$	/ /		
\$	/ /		
\$	/ /		
\$	/ /		

Sales (Writing):

B. Separately list each and every sales (writing) (including free deliveries) of Canopy Put Options from after the opening of trading on June 27, 2018 through and including the close of trading on May 28, 2020, both dates inclusive, and provide the following information (*must be documented*):

Date of Sale (Writing) (List Chrono- logically) (Month/Day/ Year)	Strike Price of Put Option	Expiration Date of Put Option (Month/ Day/ Year)	Option Class Symbol	Number of Put Options Sold (Written)	Sale Price Per Put Option	Total Sale Price (excluding taxes, commissions, and fees)	Insert an "E" if Exercised Insert an "A" if Assigned Insert an "X" if Expired	Exercise Date (Month/ Day/ Year)
/ /	\$	/ /			\$	\$		/ /
/ /	\$	/ /			\$	\$		/ /
/ /	\$	/ /			\$	\$		/ /
/ /	\$	/ /			Φ	\$		1 1

Purchases/Acquisitions:

C. Separately list each and every purchase/acquisition (including free receipts) of Canopy Put Options from after the opening of trading on June 27, 2018 through and including the close of trading on May 28, 2020, both dates inclusive, and provide the following information (*must be documented*):

Date of Purchase/ Acquisition (List Chronologically) (Month/Day/Year)	Acquisition (List Price of Chronologically) Put		Option Class Symbol	Number of Put Options Sold	Purchase/ Acquisition Price Per Put Option	Total Purchase/ Acquisition Price (excluding taxes, commissions, and fees)
/ /	\$	/ /			\$	\$
/ /	\$	/ /			\$	\$
/ /	\$	/ /			\$	\$
/ /	\$	/ /			\$	\$

Ending Holdings:							
D.	Separately list all positions in Canopy Put Options in which you had						
	an open interest as of the close of trading on May 28, 2020. (must be						

Strike Price of Put Option	Expiration Date of Put Option (Month/Day/Year)	Option Class Symbol	Number of Put Options in Which You Had an Open Interest		
\$	/ /				
\$	/ /				
\$	/ /				
\$	/ /				

If additional space is needed to list your transactions/holdings, attach separate numbered sheets, giving all required information, substantially in the same format, and print your name and Social Security or Taxpayer Identification number at the top of each sheet.

V. TAXPAYER IDENTIFICATION NUMBER

documented). If none, write "zero" or "0."

The Claimant Information form above requests a Taxpayer Identification Number. For most individuals, this is your Social Security Number. The Internal Revenue Service ("I.R.S.") requires such taxpayer identification number. If you fail to provide this information, your claim may be rejected.

VI. CERTIFICATION

I (We) submit this Proof of Claim under the terms of the Settlement described in the Notice. I (We) also submit to the jurisdiction of the United States District Court for the District of New Jersey, with respect to my (our) claim as a Settlement Class Member(s) and for purposes of enforcing the release and covenant not to sue set forth herein. I (We) further acknowledge that I am (we are) bound by and subject to the terms of any judgment that may be entered in this Action. I (We) have not submitted any other claim covering the same purchases/acquisitions or sales of Canopy

Securities during the Settlement Class Period and know of no other Person having done so on my (our) behalf.

I (We) certify that I am (we are) NOT subject to backup withholding under the provisions of Section 3406 (a)(1)(c) of the Internal Revenue Code because: (a) I am (We are) exempt from backup withholding; or (b) I (We) have not been notified by the I.R.S. that I am (we are) subject to backup withholding as a result of a failure to report all interest or dividends; or (c) the I.R.S. has notified me (us) that I am (we are) no longer subject to backup withholding.

NOTE: If you have been notified by the I.R.S. that you are subject to backup withholding, please strike out the language that you are not subject to backup withholding in the certification above.

UNDER THE PENALTIES OF PERJURY UNDER THE LAWS OF THE UNITED STATES, I (WE) CERTIFY THAT ALL OF THE INFORMATION I (WE) PROVIDED ON THIS PROOF OF CLAIM AND RELEASE FORM IS TRUE, CORRECT AND COMPLETE.

Signature of Claimant (If this claim is being made

	on behalf of Joint Claimants, then each must sign):
	(Signature)
	(Signature)
	(Capacity of person(s) signing, e.g. beneficial purchaser(s), executor, administrator, trustee, etc.) Check here if proof of authority to file is enclosed (See Item 2 under Claimant's Statement)
Date:	

THIS	PROOF	OF (CLAIM	AND	RELEASE	FORM	MUST	BE S	UBMIT	TED
ELEC	ΓRONICA	LLY A	AT WW	W.STR	ATEGICCI	LAIMS.NE	ET/NETA	PP BY	11:59	P.M.
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Canopy Securities Litigation c/o Strategic Claims Services 600 N. Jackson St., Ste. 205 P.O. Box 230 Media, PA 19063 Tel.: 866-274-4004 Fax: 610-565-7985

info@strategicclaims.net

A Proof of Claim received by the Claims Administrator shall be deemed to have been submitted when posted, if mailed by _______, 2022 and if a postmark is indicated on the envelope and it is mailed first class and addressed in accordance with the above instructions. In all other cases, a Proof of Claim shall be deemed to have been submitted when actually received by the Claims Administrator.

The Claims Administrator will acknowledge receipt of your Proof of Claim and Release Form by mail or email within 45 days of receipt. Your claim is not deemed filed until you receive such an acknowledgement. If you do not receive an acknowledgement within 45 days, please contact the Claims Administrator by telephone toll free at 1-866-274-4004 or by email at info@strategicclaims.net.

You should be aware that it will take a significant amount of time to process fully all of the Proof of Claim and Release Forms and to administer the Settlement. This work will be completed as promptly as time permits, given the need to investigate and tabulate each Proof of Claim. Please notify the Claims Administrator of any change of address.

REMINDER CHECKLIST

- o Please be sure to sign this Proof of Claim on page _____. If this Proof of Claim is submitted on behalf of joint claimants, then each claimant must sign.
- Please remember to attach supporting documents. Do NOT send any stock certificates. Keep copies of everything you submit.
- o Do NOT use highlighter on the Proof of Claim or any supporting documents.
- o If you move or change your address, telephone number, or email address, please submit the new information to the Claims Administrator, as well as any other information that will assist us in contacting you. NOTE: Failure to submit updated information to the Claims Administrator may result in the Claims Administrator's inability to contact you regarding issues with your claim or deliver payment to you.